

Promoting family time during the COVID-19 Pandemic: 12th June 2020

Guidance for practitioners: Since Friday 27th March 2020 there has been no face-to-face family time for children looked after with their family, save in exceptional circumstances. On 28th May 2020 the government issued updated social distancing guidance specifically that, 'You can spend time outdoors, including private gardens and other outdoor spaces, in groups of up to six people from different households'. A subsequent update on the 10th June 2020 extended this to the joining of a one single person household with another family household in a 'bubble' without the need for social distancing.

This practice document is to consider how children and families can maintain contact with each other in light of this updated guidance on social distancing, whilst keeping children and families, as well as staff as safe as possible. The guidance sets out considerations for the risk assessment of whether family time can move to be face-to-face; whether it should remain virtual; or be a combination of the two.

Priorities for face-to-face family time: Reintroduction of face-to-face meetings for children looked after needs to be done on an incremental basis and family time cannot resume immediately for all children and young people.

The agreed priorities for face-to-face family time are:

- Children and young people subject to care proceedings decisions have not yet been made
 for these children and young people about whether they are able to return home to live with
 birth family and assessments are ongoing.
- Children and young people living in kinship arrangements where there is identified family that
 are willing to and assessed as safely able to supervise family time. This includes children
 subject to care proceedings as well as children in long-term kinship placements. This would
 remove the need for a supervisor from Children's Social Work Service (minimising the mixing
 of households) and arrangements could be made more easily for meetings to take place in
 private gardens (as parents may already be aware of home address of the child and kinship
 carer) or public parks. Any changes should be risk assessed.
- Final goodbye contacts prior to adoption this is to avoid unnecessary delay in progressing permanence plans for children and is a one off event not a regular occurrence, lessening risk of transmission of Covid-19.
- Exceptional circumstances this is to be defined on a case by case basis. Examples include risk
 of placement breakdown; ill health of a parent; or young people being negatively impacted by
 not seeing their parents face-to-face.

Regular reviews in respect of family time are being undertaken with representations from the service and amendments to this guidance will be considered alongside any additional changes in government guidance.

Communication: Social workers should consult with children and young people about their views on the current arrangements for them to see their family and their wishes and feelings. Supervising social workers need to have the same discussion with foster carers and kinship carers about their views and any barriers that have been identified in face-to-face contact going ahead, and if they can be overcome safely.

Any discussion with parents, carers, children and young people when broaching the subject of family time need to be handled sensitively as not all face-to-face meetings will be able to resume. Factors



such as, adults not known to be socially distancing; meetings that would involve multiple households; carers/parents who are key workers; and children and adults who have underlying health conditions, mean that not all sessions will be assessed as safe to go ahead without further changes to government guidance.

Both the supervising social worker and children's social worker need to work closely together to support carers and parents to agree the frequency and how family time should take place.

Risk Assessments: Before any face-to-face meetings can resume between children looked after and their birth family, there needs to be a risk assessment to assess the risk of Covid-19. All risk assessments for face-to-face family time need to be submitted to the area Children's Service Delivery Manager for approval, with oversight from the Head of Service.

Copies of this risk assessment need to up-loaded into documents on Mosaic, and decisions whether face-to-face family time is or is not able to go ahead and the reasons for this, clearly recorded on Mosaic by the Team Manager.

Due to the risks of Covid-19, pre-lockdown levels of family time are unlikely to resume at present. It is likely that any face-to-face family time will be combined with continued arrangements for families to meet virtually. For example, if previous levels of family time were set at three times a week whilst in care proceedings, it may be reasonable to offer face-to-face family time once a week and video call contact twice a week. All face-to-face meetings will be reviewed if there is an increase in the transmission rate of Covid19 within the Leeds locality, i.e. the 'R' number being above 1.

Any proposals for face-to-face family time require a risk assessment in place to consider:

- Whether any of the adults or children have underlying health issues that make them at greater risk from Covid-19 and the medical advice around regarding this. This includes the supervisor.
- Whether adults and children have been known to be socially distancing and the risks of faceto-face meetings resuming if they are not.
- Whether carers/parents have other key worker roles. This increases the risk of Covid-19 transmission.
- Whether children in placement are attending school and in the case of families where children live apart from their brothers and sisters, how many households' face-to-face meetings would be involved. This increases the risk of Covid-19 transmission.
- Ensuring all parents, carers and staff are clear on their responsibilities for self-isolation if they display symptoms of Covid-19.
- Preparatory work needs to be done with all those attending in advance of face-to-face meetings about expectations and personal responsibilities.
- Whether carers are able to transport the children to family time to minimise the risks associated with staff transporting children.
- Sessions taking place closer to where parents live to prevent unnecessary travel on public transport. Where this cannot be avoided, that any arrangements avoid rush hour travel and parents are provided with PPE. Consideration needs to be given of how the handling of money takes place and how parents are financially supported to attend family time.
- Where family time can take place? Family time centres are not yet open and public toilets are
 closed. Face-to-face sessions are weather dependent and there needs to be clear
 conversations about the circumstances of a session not being able to go ahead, and that it
 may not be possible to rearrange every session that has to be cancelled because of the
 weather.



- It would be unrealistic and emotionally harmful to expect families that have been separated to socially distance from each other upon reuniting. A risk assessment would need to consider the impact of social distancing on children and young people and to discuss strategies on how this could be managed: the provision of wipes, antibacterial hand gel, and making sure staff are aware of the PPE available to them.
- Think about what activities children can do with their parents if they meet face-to-face and requesting that carers send children and young people with activities from their home. Provisions for cleaning of any toys will also be required after family time.
- Any area office family rooms need to be risk assessed by Health and Safety before they are able to be used.

The risk assessment is attached with an example scenario for guidance.

Appendix: Virtual family time, things to consider:

- What does the young person want and how would they prefer to have family time given the current challenges and restrictions?
- Do children, parents, carers already have the technology and do they already communicate with each other outside of direct family time at present?
- Can everyone involved be flexible and agree levels of contact between them?
- Will more frequent, shorter sessions work better?
- Be aware of what's in the background at home and other children/adults around.
- If there needs to be a more detailed plan in place such as in court proceedings; when is family time going to take place? Agree place, days, times etc. How is family time going to take place? e.g. phone calls, letters, photos calls, video messages, using game apps to play together and interact. What to expect and when?
- If emails are sent, how these can be sent securely?
- Discussion beforehand with ideas of what to talk about and what subjects to avoid with parents.
- Levels of supervision not all calls will need to be supervised, do calls need to be on speaker phone?
- How to prompt endings of phone calls for children/young people and foster carers.
- Support with technology practice runs, do parents/carers know how to use the technology and is their phone equipped?
- Clear about support with internet access if needed and how parents will receive this.
- If parents want to send children post where do they send it to there will be birthdays and presents for children and young people?
- Carers to check privacy settings on phone/personal computer.
- Who will contact whom? If led by carer they need to be on time to be clear with boundaries.
- What to do if the arrangement doesn't go ahead and who to contact if something goes wrong.
- Being explicit about what arrangements are being made for brothers and sisters and other extended family members to keep in touch.
- Explore creative solution for children with complex needs



SERVICE: Children's Social Work Service				LOCATION: F Meeting Point						
ACTIVITY: Supervised g	goodbye betweer	Billy and h	is mother Kate during	the Covid-1	19 pandemic					
Responsible Manager				Signature)				Date	
Assessment by			Signature			Date			Review Date	
What are the hazards?	Who might be harmed and how?	Wh	Evaluate the risks. nat are you already do	oing?	What furthe	r action is ne	cessary?	Action By Whom?	Action By When?	Complete Y/N (Date)
measures travelling to the centre	sh put tir pervisor are ster Carer Ontre Staff be the wind age of the color of the	e have Public trans thes for he the resing a trive at the the of the for the partake the house. the the ses thout an un treed to tra	oster carers is shielding health condition. Ting in daily exercise of the carers are in a sion going ahead. Inderlying health conditions of the carers in good health	ner to use ling peak eration to al care, to ing due to They have outside of greement The carer dition has centre.	Family Centre is general public specifically for will be a super family and one maintaining a metres away from some of the place outside it. Promotion of and exit of the sanitiser and Toys used to be end of the sess. Minimal toys in is difficult to wa meeting taking Government graters away goodbye sess detrimental to wellbeing to skate and he suppose the superior of the sess.	use. It will in this meeting rvisor presented in social disportant disportant in the weather of the weather of the weather of the room, and it is one of the control of the socially distance is the socially distance in the socially distance in the socially distance in the socially distance in the socially distance is the socially distance in the social	be opened and there and there and there are staff, stanced 2 I the family. be taking a se of hand disinfected. The abox at the aning. This is a would be emotional ance from	Sw to ask team manager to approve costs to fund Kate to travel to the centre via taxi (Kate would have to take two buses) to minimise her proximity to the general public. Sw to drop off face masks and gloves for Kate to use on public transport/		



What are the hazards?	Who might be harmed and how	Evaluate the risks. What are you already doing?	What further action is necessary?	Action By Whom?	Action By When?	Complete Y/N (Date)
			reassurance from a familiar person as he is away from his main caregivers. Discussion and preparatory work with Kate prior to the session taking place to be clear about expectations and plans to ensure everyone minimises risk of infection. Kate has been responsive to input from sw and support during family time Check that Kate is coming on the morning of the session. Kate and supervisors to be asked to use toilet facilities before travelling to the centre. Carer will be asked to change Billy before travelling to the centre.			

Risk Assessment Form PS4 F1- Continued

	Kate Billy	Kate has spoken to the Covid-19 response team who have suggested due to previous health conditions it is		
Kate's ill health	Supervisor	likely that she has a chest infection, supported by a sputum test. Kate has		
		responded to anti-biotics, which her		



	Carer		medical professional has said supported this diagnosis. Kate is having an x-ray on Friday Kate to get feedback from the X-Ray Promote handwashing on arrival and departure from the centre.			
The impact on Billy/Kate if the session was not to go ahead	Kate/Billy	Further delay for Billy in adoption when the family finding has taken a long time. Emotional distress and impact on identity not being able to say goodbye to each other, sense of loss and grief.	Risk Assessment completed to see if the session can go ahead as safely as possible.			
What are the hazards?	Who might be harmed and how	Evaluate the risks. What are you already doing?	What further action is necessary?	Action By Whom?	Action By When?	Complete Y/N (Date)
Kate would like to bring a picnic for Billy; chances of cross-contamination.	Child Kate	Discussion needs to take place with Kate about bringing packaged food that can be wiped down on arrival at the centre.				
Billy has not seen Kate for two months due to the Covid-19 pandemic and may	Child	Kate has observed Billy to become distressed once during family time and this was when the carer was late. The carer is transporting Billy to provide emotional reassurance to	Sw to call Kate on the day of the session to check that she is still planning to attend. sw to check with transport, if a taxi is			

Recommendation: Can face-to-face family time safely resume? If yes please provide rationale and brief summary of safety measures in place, as well as proposed details of venue, frequency, and levels of supervision. If face-to-face family time is not recommended at this stage, please provide a rationale for this.